PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2880

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

PAULY, DEVRIES SMITH & DEFFNER, L.L.C.

06/24/2010

7590

PLAZA VII- SUITE 3000

62058

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Plant, advance orders and notification of maintenance fees will be mailed to the current correspondence address as address, and to the current correspondence will be address. The confidence of the public of the public

45 SOUTH SEV MINNEAPOLIS	ENTH STREET MN 55402-1630		tran	smitted to the USPTO (5	71) 273-2885, on the dat	
	,		_	FILED VIA E	FS WEB	(Depositor's name)
				September 2	4, 2010	(Signature) (Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.
10/800,806	10/800,806 03/15/2004		Jeffrey A. Von Arx		115.0080US01	1609
TITLE OF INVENTION IMPLANTABLE MEDIC	ON: SYSTEM AND CAL DEVICE	METHOD FOR SECU	RELY AUTHENTICATI	NG A DATA EXCH	ANGE SESSION WIT	TH AN
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	09/24/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS]		
KAPLAN, BENJAMIN A 2434			713-169000	•		
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563). Change of correspondence address (or Change of Correspondence Address form "FUOSBI'22) attached. "Fee Address" indication (or "Fee Address" Indication form PTOSBI'47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				the patent front page, list Pauly, DeVries Sm		
			 the names of up to 3 registered pate or agents OR, alternatively, 		. & Defi	ner. L.L.C.
			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	ne)		
PLEASE NOTE: Unl	ess an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the pa T a substitute for filing an	atent. If an assignee is i	dentified below, the doc	nument has been filed for
(A) NAME OF ASSIG			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
CARDIA	C PACEMAKER	S, INC.	MN USA			
Please check the appropr	iate assignce category or	categories (will not be pr	rinted on the patent) :	Individual Corpora	tion or other private grou	p entity Government
☑ Issue Fee ☑ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required (seq.6), any deficiency, or credit any overpayment, to Deposit Account Number _ 50_368 (enclose an extra copy of this form).			
 Change in Entity Star a. Applicant claim 	tus (from status indicate s SMALL ENTITY state		☐ b. Applicant is no long	ger claiming SMALL EN	TITY status. See 37 CFI	R 1.27(g)(2).
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req ecords of the United Sta	uired) will not be accepte	d from anyone other than to Office.	he applicant; a registered	attorney or agent; or the	assignee or other party in
Authorized Signature	/Mark E.	Deffner/		DateSept	ember 24, 2	010
Typed or printed nameMark E. Deffner			Registration No	55103		
This collection of inform an application. Confident submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 C tiality is governed by 35 I application form to the ons for reducing this bu irginia 22213-1450. DO 13-1450.	CFR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the ONOT SEND FEES OR	on is required to obtain or r 1.14. This collection is est r depending upon the indiv e Chief Information Office COMPLETED FORMS TO	etain a benefit by the pub imated to take 12 minute idual case. Any commer r, U.S. Patent and Trade O THIS ADDRESS. SEN	olic which is to file (and is to complete, including as on the amount of tim mark Office, U.S. Depar ID TO: Commissioner fo	by the USPTO to process) gathering, preparing, and e you require to complete tment of Commerce, P.O. or Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope